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TO: Members of the human retrovirus subcommittee of
the Retrovirus Study Group

FROM: Harold Varmus

I am enclosing two sets of documents for study and comment: a collection of proposals for naming human AIDS virus isolates and a group of letters that provide advice or endorsements of other proposals. You will find a surprisingly large number of names advanced, including those already in use (see Table). Many of these are variations on the same theme (e.g., dependent upon the choice of letters to emphasize in the acronym), but there are other differences that represent fundamentally distinct attitudes towards nomenclature. These range from the non-discriminatory approach of numbering distinct human retroviruses in order of isolation (e.g., human retrovirus-1, -2, etc.) to approaches based upon disease association (e.g., human AIDS or AIDS-related viruses), pathogenetic mechanism (e.g., human immunodeficiency virus or immunosuppression virus), cell tropism (human T cell lymphotropic virus), or combinations of these features (e.g., human T lymphocyte destroying virus).

In responding to these suggestions, you should keep in mind several aspects of the problem: the basis for speciating viruses as described in my earlier mailing; the characteristics of the virus, if any, to be emphasized by the choice of the name; the acceptability of names to the scientific and clinical communities; the precedents for choice of names in retrovirology (i.e., should we conform to the use of host species and "virus," rather than "retrovirus," in the name?); the devices that could be used to designate individual isolates of a species (an issue not formally in our purview); the effects of our choice upon the names for other human retroviruses (e.g., HTLV-1, human foamy viruses); and, I suppose inevitably, the realpolitik of what is likely to be used by those working with the viruses, independent of theoretical considerations.

I would like to have some response from everyone within a week of receiving this letter. Responses may be simple statements of preferences or point-by-point analyses of the various proposals. All are requested to return a straw ballot that is also enclosed. I hope with this vote to get some idea of the likelihood of reaching an agreement, with or without a meeting of at least some members of our group.

Names Proposed

Acronyms

Human retrovirus-3	HRV-3, or HR-3
Human AIDS virus (or AIDS-associated virus)	HAV (or AAV)
AIDS-associated retrovirus	ARV
Human AIDS-related retrovirus	HARV
Human AIDS retrovirus	HAR
Lymphadenopathy-AIDS virus	LAV
Human AIDS-lymphotropic virus (or lymphotropic AIDS-causing virus)	HALV (or HLAV)
Human T cell lymphotropic virus-III	HTLV-III
Human T lymphotropic retrovirus	HTLR
Human lymphotropic retrovirus	HLRV
Human T lymphocyte destroying virus	HTLDV
Human T cell immunodepressant (or cytocidal) virus	HTIV (or HTCIV)
Human immunodeficiency virus	HIDV
Human immunosuppression virus	HISV (or HIV)